



PTO/68/82 701-06)
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	Application Number 10812280
REVOCATION OF POWER OF	Filing Date
ATTORNEY WITH	First Named Inventor
NEW POWER OF ATTORNEY	Art Unit
AND CHANGE OF CORRESPONDENCE ADDRESS	Examiner Name
CHARGE OF BOTHEST BIRETE ABBITEDS	Attorney Docket Number   678-1280
I hereby revoke all previous powers of attorney given in the above-identified application.	
A Power of Attorney is submitted herewith.	
OR	
I hereby appoint the practitioners associated with the Customer Number 66547	
Please change the correspondence address for the above-identified application to:  The address associated with Customer Number:  66547	
Firm or Individual Name	
Address	
City	State Zip
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Telephone	Email
Applicant/Inventor  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98)	
SIGNATURE of Applicant or Assignee of Record	
Signature Q. J. Alexander	
Name .long You President of Samsong Electronics Co., Ltd.	
Date 16. Nov. 2006 Telephone	
NOTE. Signatures of all the inventors or designees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one alignature is required, see below.	
"Total offorms are submitted	

The collection of information is required by 27 CPN 1.36. The information is required to obtain or return a bounds by the public which is to the (and by the USPTO to process) an apparent. Consequently is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to late 3 minutes to complete including settlement, proparing, and submitting the complete application form to the USPTO. This will vary deponding upon the includical case. Any comments on the transport of time year representations for recovery of time year of the formation officer. U.S. Petent and Trudement Office, U.S. Consument of Commerce, I.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Potents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, cold 1-909-PTO-2199 and select oppoin Z